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52123	7590 08/23	/2010		Cor	tificate	of Mailing or Transm	ission		
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			<u>L</u>		1	Table 1			
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO				CONFIRMATION NO.		
10/599,832 TITLE OF INVENTION	10/11/2006		Takaharu Tanaka			P30819	5260		
THEE OF INVESTION									
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU		E PEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	\$300	\$0		\$1810	11/23/2010		
EXAMINER ART		ART UNIT	CLASS-SUBCLASS						
HOANG, PHI		2628	345-572000						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up or agents OR, altern (2) the name of a sin registered attorney of	a single firm (having as a member a ley or agent) and the names of up to the autorneys or agents. If no name is					
3. ASSIGNEE NAME A	ND RESIDENCE DAT.	A TO BE PRINTED ON	THE PATENT (print or	type)					
PLEASE NOTE: Uni recordation as set fort	less an assignee is ident h in 37 CFR 3.11. Com	ified below, no assignee pletion of this form is NO	data will appear on the T a substitute for filing	patent. If an assign an assignment.	nee is id	lentified below, the do	cument has been filed for		
(A) NAME OF ASSI	(B) RESIDENCE: (CI	(CITY and STATE OR COUNTRY)							
PANASONIC	CORPORATION		OSAKA, J	APAN					
Please check the appropr	iate assignee category of	r categories (will not be p	rinted on the patent):	☐ Individual 🛛 C	orporati	on or other private grou	up entity Government		
	are submitted: Yo small entity discount # of Copies	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO 2038—is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0089 (enclose an extra copy of this form).							
	IS SMALL ENTITY stat	us. See 37 CFR 1.27.				ΓΙΤΥ status. See 37 CF			
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Authorized Signature	MM	J Will	liam Pieprz No. 33,630	Date 1	1-8	U			
Typed or printed nam		_		Registration		•	by the HSPTO to process		
an application. Confiden	nation is required by 37 (itiality is governed by 35	5 U.S.C. 122 and 37 CFR	1.14. This collection is	estimated to take 12	minutes	s to complete, including	by the USPTO to process) g gathering, preparing, and		

an application. Confidentially is governed by 35 0.3.C. 122 and 37 CFK 1.14. This Confection is estimated to take 12 infinitely interest of the complete completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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	ENCE ADDRESS (Note: Use BI	lock 1 for any change of address	I p	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
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			-				(Signature) (Date)		
APPLICATION NO. FILING DATE			FIRST NAMED INVENT	RST NAMED INVENTOR ATT			CONFIRMATION NO.		
10/599,832	10/11/2006	.	Takaharu Tanaka				5260		
·		CCESS METHOD TO	RECTANGULAR AREA						
						P			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	\$300	\$0		\$1810	11/23/2010		
EXAMINER ART UNIT			CLASS-SUBCLASS						
HOANG, PHI 2628			345-572000						
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PTO/SB/47; Rev 03-0 Number is required.	02 or more recent) attack	2 registered patent a listed, no name will	ttorneys or agents. If be printed.	no nan	ne is 3				
			N THE PATENT (print or	••					
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(A) NAME OF ASSI	GNEE		(B) RESIDENCE: (CI	TY and STATE OR (COUNT	ΓRY)			
PANASONIC	CORPORATION		OSAKA, J	APAN					
Please check the appropr	riate assignee category of	r categories (will not be	printed on the patent):	☐ Individual C	orporat	ion or other private gro	up entity Government		
4a. The following fee(s) Issue Fee			4b. Payment of Fee(s): (I		ny pre	viously paid issue fee	shown above)		
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	d Publication Fee (if req	uired) will not be accer	oted from anyone other tha				e assignee or other party in		
interest as shown by the	The state of the ordinary	ales I and II and I I adein	ark Office.			_	1		
Authorized Signature	11 Mary	$\sqrt{}$ wi	lliam Pieprz	Date	2-1	<u>v</u>			
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